



*Don*

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2007</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/603,835-Conf. #4076
<b>TOTAL AMOUNT OF PAYMENT</b>		Filing Date	June 26, 2003
(\$)		First Named Inventor	Atsushi Ikeno
0.00		Examiner Name	D. Faber
		Art Unit	2178
		Attorney Docket No.	31759-190543

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**      **Multiple Dependent Claims**

\_\_\_\_\_ - 20 = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_      **Fee (\$)**      **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - 3 = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**      **Extra Sheets**      **Number of each additional 50 or fraction thereof**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**      **Fees Paid (\$)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

<b>SUBMITTED BY</b>			
Signature	<i>Catherine M. Voorhees</i>	Registration No. (Attorney/Agent)	33,074
Name (Print/Type)	Catherine M. Voorhees	Telephone	(202) 344-4000
		Date	July 11, 2007



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Atsushi IKENO

Appl. No: 10/603,835

Confirmation No: 4076

Filed: June 26, 2003

For: INFORMATION PARTITIONING  
APPARATUS, INFORMATION  
PARTITIONING METHOD,  
INFORMATION PARTITIONING  
PROGRAM, AND RECORDING  
MEDIUM ON WHICH  
INFORMATION PARTITIONING  
PROGRAM HAS BEEN RECORDED

Art Unit: 2178

Examiner: David Farber

Atty. Docket No: 31759-190543

Customer No:

**26694**

PATENT TRADEMARK OFFICE

**AMENDMENT**

**Mail Stop Amendment**

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action mailed April 18, 2007, please amend the above-application as follows:

**Amendments to the Claims** are reflected in the Listing of Claims which begin on page 2 of this paper.

**Amendments to the Drawings** begin on page 8 of this paper.

**Remarks** begin on page 9 of this paper.